

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021104**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: BIKTARVY 30CT, 50/200/25 MG NDC: 61958-2501-01			Reference Number: <u>01I44144</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
020734	2		Reference Date: <u>03/03/21</u>
021345	6		
021347	7		

(TH) Transaction History

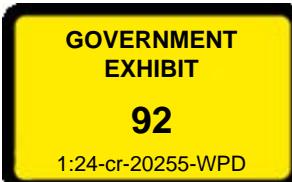
Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Received & Ref : 02/07/21 921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017438
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021104**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: BIKTARVY 30CT, 50/200/25 MG NDC: 61958-2501-01			Reference Number: <u>01I44144</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
021350	4		Reference Date: <u>03/03/21</u>
023252	6		

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Received & Ref : 02/07/21 921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017438
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

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SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021104**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: BIKTARVY 30CT, 50/200/25 MG NDC: 61958-2501-01			Reference Number: <u>01I44132</u>
Lot Number <u>CDFYCA</u>	Quantity <u>1</u>	Unique Serial #	Document Type: <u>Invoice</u>
			Reference Date: <u>03/03/21</u>

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Received & Ref : 02/07/21 921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017438
SOLD TO: Name: DRUGSMART PHARMACY Address: 300 MAIN STREET KEANSBURG NJ 07734 Date Purchased & Ref : 03/03/21 01S40004001	SHIPPED TO: Name: DRUGSMART PHARMACY Address: 300 MAIN STREET KEANSBURG NJ 07734 Date Received & Ref : 03/03/21 01S40004001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

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SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021104**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: BIKTARVY 30CT, 50/200/25 MG NDC: 61958-2501-01			Reference Number: <u>01I44141</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
020733	11		Reference Date: <u>03/03/21</u>
021350	4		
022614	2		

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

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SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017438
SOLD TO: Name: MEDICINE SHOPPE #1802 Address: 10313 GEORGIA AVENUE #101 SILVER SPRING MD 20902 Date Purchased & Ref : 03/03/21 01S40015001	SHIPPED TO: Name: MEDICINE SHOPPE #1802 Address: 10313 GEORGIA AVENUE #101 SILVER SPRING MD 20902 Date Received & Ref : 03/03/21 01S40015001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

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Drug Name, Strength, Dosage Form, Container Size: BIKTARVY 30CT, 50/200/25 MG NDC: 61958-2501-01			Reference Number: <u>01I44141</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
022616	2		Reference Date: <u>03/03/21</u>
023255	1		
023775	1		

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

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SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017438
SOLD TO: Name: MEDICINE SHOPPE #1802 Address: 10313 GEORGIA AVENUE #101 SILVER SPRING MD 20902 Date Purchased & Ref : 03/03/21 01S40015001	SHIPPED TO: Name: MEDICINE SHOPPE #1802 Address: 10313 GEORGIA AVENUE #101 SILVER SPRING MD 20902 Date Received & Ref : 03/03/21 01S40015001
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Drug Supply Chain Security Act Document Doc#00000021104**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: BIKTARVY 30CT, 50/200/25 MG NDC: 61958-2501-01			Reference Number: <u>01I44141</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
025101	3		Reference Date: <u>03/03/21</u>
CFBGKA	1		

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

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SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017438
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SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021105**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: DESCOZY TAB 30CT, 200/25MG NDC: 61958-2002-01			Reference Number: <u>01I44144</u>
			Document Type: <u>Invoice</u>
			Reference Date: <u>03/03/21</u>
Lot Number	Quantity	Unique Serial #	
019457	1		
019816	2		
021596	1		

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

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SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021105**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: DESCOZY TAB 30CT, 200/25MG NDC: 61958-2002-01			Reference Number: <u>01I44144</u>
			Document Type: <u>Invoice</u>
			Reference Date: <u>03/03/21</u>
Lot Number	Quantity	Unique Serial #	
021597	1		
022575	1		
022577	1		

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

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SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

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SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021105**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: DESCOZY TAB 30CT, 200/25MG NDC: 61958-2002-01			Reference Number: <u>01I44144</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
6425303A	1		Reference Date: <u>03/03/21</u>
6468401D	1		
6485402A	1		

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

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SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

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Drug Supply Chain Security Act Document Doc#00000021105**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: DESCOZY TAB 30CT, 200/25MG NDC: 61958-2002-01			Reference Number: <u>01I44144</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
6485403A	1		Reference Date: <u>03/03/21</u>

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC
 Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
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SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

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SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021107**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: GENVOYA TAB 30CT, 150/150/200/10MG NDC: 61958-1901-01			Reference Number: <u>01I44144</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
CFCMFA	12		Reference Date: <u>03/03/21</u>

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021108**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: INTELENCE 200MG TAB 60CT,			Reference Number: <u>01I44143</u>
NDC: 59676-0571-01			Document Type: <u>Invoice</u>
Lot Number <u>KGL0001</u>	Quantity <u>2</u>	Unique Serial #	Reference Date: <u>03/03/21</u>

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: VAN WYCK PRESCRIPTION CENTER Address: 88-20B VAN WYCK EXPRESSWAY RICHMOND HILL NY 11418 Date Purchased & Ref : 03/03/21 01S40024001	SHIPPED TO: Name: VAN WYCK PRESCRIPTION CENTER Address: 88-20B VAN WYCK EXPRESSWAY RICHMOND HILL NY 11418 Date Received & Ref : 03/03/21 01S40024001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021109**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: ISENTRESS 400MG TAB 60CT,			Reference Number: <u>01I44144</u>
NDC: 00006-0227-61			Document Type: <u>Invoice</u>
Lot Number Quantity Unique Serial #			Reference Date: <u>03/03/21</u>
T032793	2		
T040169	1		
T040170	1		

(TH) Transaction History

Manufacturer's Name: MERCK SHARP & DOHME

Manufacturer's information: 770 SUMNEYTOWN LANDSDALE, PA 19446

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021111**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: MAVYRET TAB 84CT, 100/40MG NDC: 00074-2625-28			Reference Number: <u>01I44137</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
1131125	1		Reference Date: <u>03/03/21</u>

(TH) Transaction History

Manufacturer's Name: AbbVie, Inc

Manufacturer's information: 1400 Sheridan Rd North Chicago, IL 60064

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: KINGS SUPER PHARMACY Address: 357 FLATBUSH AVE BROOKLYN NY 11238 Date Purchased & Ref : 03/03/21 01S40021001	SHIPPED TO: Name: KINGS SUPER PHARMACY Address: 357 FLATBUSH AVE BROOKLYN NY 11238 Date Received & Ref : 03/03/21 01S40021001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021112**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: ODEFSEY TAB 30CT, 200/25/25 MG NDC: 61958-2101-01			Reference Number: <u>01I44144</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
019825	1		Reference Date: <u>03/03/21</u>
020233	1		
020479	1		

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021112**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: ODEFSEY TAB 30CT, 200/25/25 MG NDC: 61958-2101-01			Reference Number: <u>01I44144</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
021327	1		Reference Date: <u>03/03/21</u>
023234	1		
020236	1		

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021112**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: ODEFSEY TAB 30CT, 200/25/25 MG NDC: 61958-2101-01			Reference Number: <u>01I44141</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
023236	2		Reference Date: <u>03/03/21</u>
023237	1		
023238	1		

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: MEDICINE SHOPPE #1802 Address: 10313 GEORGIA AVENUE #101 SILVER SPRING MD 20902 Date Purchased & Ref : 03/03/21 01S40015001	SHIPPED TO: Name: MEDICINE SHOPPE #1802 Address: 10313 GEORGIA AVENUE #101 SILVER SPRING MD 20902 Date Received & Ref : 03/03/21 01S40015001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021112**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: ODEFSEY TAB 30CT, 200/25/25 MG NDC: 61958-2101-01			Reference Number: <u>01I44141</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
023334	1		Reference Date: <u>03/03/21</u>
023779	2		

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: MEDICINE SHOPPE #1802 Address: 10313 GEORGIA AVENUE #101 SILVER SPRING MD 20902 Date Purchased & Ref : 03/03/21 01S40015001	SHIPPED TO: Name: MEDICINE SHOPPE #1802 Address: 10313 GEORGIA AVENUE #101 SILVER SPRING MD 20902 Date Received & Ref : 03/03/21 01S40015001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021114**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: PREZCOBIX TAB 30 CT, 800/150 MG NDC: 59676-0575-30			Reference Number: <u>01I44143</u>
			Document Type: <u>Invoice</u>
			Reference Date: <u>03/03/21</u>
Lot Number	Quantity	Unique Serial #	
20LG388	1		
20LG391	1		
20MG466	1		

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: VAN WYCK PRESCRIPTION CENTER Address: 88-20B VAN WYCK EXPRESSWAY RICHMOND HILL NY 11418 Date Purchased & Ref : 03/03/21 01S40024001	SHIPPED TO: Name: VAN WYCK PRESCRIPTION CENTER Address: 88-20B VAN WYCK EXPRESSWAY RICHMOND HILL NY 11418 Date Received & Ref : 03/03/21 01S40024001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021114**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: PREZCOBIX TAB 30 CT, 800/150 MG NDC: 59676-0575-30			Reference Number: <u>01I44130</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
20LG388	1		Reference Date: <u>03/03/21</u>

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: RARITAN BAY PHARMACY Address: 501 NEW BRUNSWICK AVENUE PERTH AMBOY NJ 08861 Date Purchased & Ref : 03/03/21 01S40036001	SHIPPED TO: Name: RARITAN BAY PHARMACY Address: 501 NEW BRUNSWICK AVENUE PERTH AMBOY NJ 08861 Date Received & Ref : 03/03/21 01S40036001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021116**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: PREZISTA 800MG TAB 30CT,			Reference Number: <u>01I44144</u>
NDC: 59676-0566-30			Document Type: <u>Invoice</u>
Lot Number Quantity Unique Serial #			Reference Date: <u>03/03/21</u>
20HG207	1		
20JG278	1		
20LG416	1		

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021115**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: PREZISTA 600MG TAB 60CT,			Reference Number: <u>01I44140</u>
NDC: 59676-0562-01			Document Type: <u>Invoice</u>
Lot Number <u>20LG401</u>	Quantity <u>1</u>	Unique Serial #	Reference Date: <u>03/03/21</u>

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: FARMACIA APOTEK Address: 753 EAST TREMONT AVE BRONX NY 10457 Date Purchased & Ref : 03/03/21 01S40025001	SHIPPED TO: Name: FARMACIA APOTEK Address: 753 EAST TREMONT AVE BRONX NY 10457 Date Received & Ref : 03/03/21 01S40025001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021114**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: PREZCOBIX TAB 30 CT, 800/150 MG NDC: 59676-0575-30			Reference Number: <u>01I44140</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
20LG388	1		Reference Date: <u>03/03/21</u>

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: FARMACIA APOTEK Address: 753 EAST TREMONT AVE BRONX NY 10457 Date Purchased & Ref : 03/03/21 01S40025001	SHIPPED TO: Name: FARMACIA APOTEK Address: 753 EAST TREMONT AVE BRONX NY 10457 Date Received & Ref : 03/03/21 01S40025001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021117**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA TAB 30CT, 800/150/200/10MG NDC: 59676-0800-30			Reference Number: <u>01I44140</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
20LG431	1		Reference Date: <u>03/03/21</u>
20KG322	1		

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: FARMACIA APOTEK Address: 753 EAST TREMONT AVE BRONX NY 10457 Date Purchased & Ref : 03/03/21 01S40025001	SHIPPED TO: Name: FARMACIA APOTEK Address: 753 EAST TREMONT AVE BRONX NY 10457 Date Received & Ref : 03/03/21 01S40025001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021115**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: PREZISTA 600MG TAB 60CT,			Reference Number: <u>01I44123</u>
NDC: 59676-0562-01			Document Type: <u>Invoice</u>
Lot Number <u>20LG401</u>	Quantity <u>1</u>	Unique Serial #	Reference Date: <u>03/03/21</u>

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARROLINA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEGEND DRUGS 1 LLC Address: 159 E GUNHILL ROAD BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40091001	SHIPPED TO: Name: LEGEND DRUGS 1 LLC Address: 159 E GUNHILL ROAD BRONX NY 10467 Date Received & Ref : 03/03/21 01S40091001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021115**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: PREZISTA 600MG TAB 60CT,			Reference Number: <u>01I44129</u>
NDC: 59676-0562-01			Document Type: <u>Invoice</u>
Lot Number <u>20LG401</u>	Quantity <u>1</u>	Unique Serial #	Reference Date: <u>03/03/21</u>

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: NORWOOD PHARMACY Address: 2490 FREDERICK DOUGLAS BLVD. NEW YORK NY 10030 Date Purchased & Ref : 03/03/21 01S40081001	SHIPPED TO: Name: NORWOOD PHARMACY Address: 2490 FREDERICK DOUGLAS BLVD. NEW YORK NY 10030 Date Received & Ref : 03/03/21 01S40081001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021117**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA TAB 30CT, 800/150/200/10MG NDC: 59676-0800-30			Reference Number: <u>01I44127</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
20LG396	1		Reference Date: <u>03/03/21</u>

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: ELDER PHARMACY Address: 1527 WESTCHESTER AVE. BRONX NY 10472 Date Purchased & Ref : 03/03/21 01S40040001	SHIPPED TO: Name: ELDER PHARMACY LLC Address: 1527 WESTCHESTER AVE BRONX NY 10472 Date Received & Ref : 03/03/21 01S40040001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021117**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA TAB 30CT, 800/150/200/10MG NDC: 59676-0800-30			Reference Number: <u>01I44143</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
20KG332	4		Reference Date: <u>03/03/21</u>
20KG322	2		

(TH) Transaction History

Manufacturer's Name: JANSSEN
 Manufacturer's information 1000 US-202 RARITAN,NJ 08869

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIONA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: VAN WYCK PRESCRIPTION CENTER Address: 88-20B VAN WYCK EXPRESSWAY RICHMOND HILL NY 11418 Date Purchased & Ref : 03/03/21 01S40024001	SHIPPED TO: Name: VAN WYCK PRESCRIPTION CENTER Address: 88-20B VAN WYCK EXPRESSWAY RICHMOND HILL NY 11418 Date Received & Ref : 03/03/21 01S40024001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021118**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TIVICAY 50MG TAB 30CT,			Reference Number: <u>01I44144</u>
NDC: 49702-0228-13			Document Type: <u>Invoice</u>
Lot Number	Quantity	Unique Serial #	Reference Date: <u>03/03/21</u>
682E	2		
8L3M	1		
9R2Y	1		

(TH) Transaction History

Manufacturer's Name: VIVIENNE HOSPITALITY

Manufacturer's information: Five Moore Drive RESEARCH TRIANGLE PARK, NC 27709

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIEA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIEA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021118**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TIVICAY 50MG TAB 30CT,			Reference Number: <u>01I44144</u>
NDC: 49702-0228-13			Document Type: <u>Invoice</u>
Lot Number	Quantity	Unique Serial #	Reference Date: <u>03/03/21</u>
FU5E	5		
GH3U	2		
LD3H	1		

(TH) Transaction History

Manufacturer's Name: VIVIENNE HOSPITALITY INC
 Manufacturer's information: Five Moore Drive RESEARCH TRIANGLE PARK, NC 27709

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIEA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIEA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021118**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TIVICAY 50MG TAB 30CT,			Reference Number: <u>01I44144</u>
NDC: 49702-0228-13			Document Type: <u>Invoice</u>
Lot Number	Quantity	Unique Serial #	Reference Date: <u>03/03/21</u>
PW4Y	1		
RN2F	1		

(TH) Transaction History

Manufacturer's Name: VIVIENNE HOSPITALITY INC
 Manufacturer's information: Five Moore Drive RESEARCH TRIANGLE PARK, NC 27709

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIEA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIEA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021119**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ TAB 30CT, 600/50/300MG NDC: 49702-0231-13			Reference Number: <u>01I44144</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
2T4G	1		Reference Date: <u>03/03/21</u>
7N9K	1		
GS5E	4		

(TH) Transaction History

Manufacturer's Name: **VIVIENNE WESTWALL**
 Manufacturer's information: **Five Moore Drive RESEARCH TRIANGLE PARK, NC 27709**

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIEA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIEA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
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- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021119**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ TAB 30CT, 600/50/300MG NDC: 49702-0231-13			Reference Number: <u>01I44144</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
GS5G	1		Reference Date: <u>03/03/21</u>
N78R	1		
RN2K	2		

(TH) Transaction History

Manufacturer's Name: **VIVIENNE WESTWALL**
 Manufacturer's information: **Five Moore Drive RESEARCH TRIANGLE PARK, NC 27709**

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIEA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIEA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

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- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc#00000021119**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ TAB 30CT, 600/50/300MG NDC: 49702-0231-13			Reference Number: <u>01I44144</u>
Lot Number	Quantity	Unique Serial #	Document Type: <u>Invoice</u>
V79D	1		Reference Date: <u>03/03/21</u>

(TH) Transaction History

Manufacturer's Name: VIVIENNE HOSPITALITY INC
 Manufacturer's information: Five Moore Drive RESEARCH TRIANGLE PARK, NC 27709

SOLD TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIEA PR 00982 Date Purchased & Ref : 02/07/21 14921679	SHIPPED TO: Name: WHOLESALERS GROUP INC. Address: 917 CALLE TRINITY CARRIEA PR 00982 Date Received & Ref : 02/07/21 14921679
SOLD TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Purchased & Ref : 02/23/21 8C13810	SHIPPED TO: Name: SYNERGY GROUP WHOLESALERS Address: 491 AMWELL RD SUITE 103 HILLSBOROUGH NJ 08844 Date Received & Ref : 02/23/21 8C13810
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/02/21 PO#01212140	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/03/21 RC#017439
SOLD TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Purchased & Ref : 03/03/21 01S40011001	SHIPPED TO: Name: LEROY PHARMACY Address: 314 EAST 204TH ST BRONX NY 10467 Date Received & Ref : 03/03/21 01S40011001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
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- (F) did not knowingly provide false transaction information; and
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